

**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
**(Schedule E)**PAGE 1 OF 1  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>Black PAC</b>			FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00609388		
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report			<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		
Full Name of Payee <b>Break Something Inc.</b>			Date of Public Distribution/Dissemination MM / DD / YYYY <b>07 / 31 / 2020</b>		
Mailing Address 1701 Rhode Island Ave NW FI 5			Amount 5000.00		
City Washington State DC Zip Code 20036-3040		Transaction ID : VTDG0AEJAA5 Date of Disbursement or Obligation MM / DD / YYYY			
Purpose of Expenditure Digital Advertisements - Estimate		Category/ Type			
Name of Federal Candidate Trump, Donald, J., ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought		1147846.22		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee <b>Break Something Inc.</b>			Date of Public Distribution/Dissemination MM / DD / YYYY <b>07 / 31 / 2020</b>		
Mailing Address 1701 Rhode Island Ave NW FI 5			Amount 5000.00		
City Washington State DC Zip Code 20036-3040		Transaction ID : VTDG0AEJAB2 Date of Disbursement or Obligation MM / DD / YYYY			
Purpose of Expenditure Digital Advertisements - Estimate		Category/ Type			
Name of Federal Candidate Tillis, Thom, R., ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NC	
Calendar Year-To-Date Per Election for Office Sought		31454.15		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			10000.00		
(b) SUBTOTAL of Unitemized Independent Expenditures ..... ▶					
(c) TOTAL Independent Expenditures..... ▶			10000.00		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature  Shropshire, Adrienne, R., ,		[Electronically Filed]		Date MM / DD / YYYY <b>07 / 31 / 2020</b>	